

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**



Declaration  
Submitted  
With Initial  
Filing

OR



Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number

A01490

First Named Inventor

Gordon L. Tullos

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**CURABLE COATING POWDERS AND POWDER COATINGS FORMED THEREFROM**

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: <span style="border: 1px solid black; padding: 2px;">21898</span> <b>OR</b> <input type="checkbox"/> Correspondence address below			
Name			
Address			
City		State	ZIP
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Gordon		Family Name or Surname Tullos	
Inventor's Signature <i>Adrian Z. Tullos</i>		Date Oct. 13, 2003	
Residence: City Reading	State PA	Country USA	Citizenship US
Mailing Address 106 Nicole Dr.			
City Reading	State PA	ZIP 19606	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Glenn		Family Name or Surname Correll	
Inventor's Signature <i>Glenn Correll</i>		Date 10/13/2003	
Residence: City Birdsboro	State PA	Country USA	Citizenship US
Mailing Address 505 Hopewell Street			
City Birdsboro	State PA	ZIP 19508	Country USA
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>1</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental SheetPage 3 of 3

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Joseph		Kozlowski	
Inventor's Signature <i>Joseph J Kozlowski</i>		Date <i>Oct 10, 2003</i>	
Reading Residence: City	PA State	USA Country	US Citizenship
504 Lawrence Avenue Mailing Address			
Mailing Address			
Reading City	PA State	19609 Zip	USA Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Caryll		Seelig	
Inventor's Signature <i>Caryll Seelig</i>		Date <i>October 22, 2003</i>	
Reading Residence: City	PA State	USA Country	US Citizenship
3909 Ardmore Avenue Mailing Address			
Mailing Address			
Reading City	PA State	19605 Zip	USA Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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# **POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM**

<b>Application Number</b>	
<b>Filing Date</b>	
<b>First Named Inventor</b>	Gordon L. Tullos
<b>Title</b>	
<b>Art Unit</b>	
<b>Examiner Name</b>	
<b>Attorney Docket Number</b>	A01490

I hereby appoint:

☒ Practitioners associated with the Customer Number:

21898

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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OR

☐ The address associated with Customer Number:

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<input type="checkbox"/> Firm or Individual Name				
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Address				
City	State	Zip		
Country				
Telephone	Fax			

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## **SIGNATURE of Applicant or Assignee of Record**

<b>Name</b>	Gordon Tullos		
<b>Signature</b>	<i>Gordon L. Tullos</i>		
<b>Date</b>	October 13, 2003	<b>Telephone</b>	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 4 forms are submitted.

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## **SIGNATURE of Applicant or Assignee of Record**

Name	Glenn Correll		
Signature	<i>Glenn Correll</i>		
Date	10/13/2003	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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First Named Inventor	Gordon L. Tullos
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Art Unit	
Examiner Name	
Attorney Docket Number	A01490

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OR

Firm or  
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:



Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## **SIGNATURE of Applicant or Assignee of Record**

Name	Carryll Seelig		
Signature	<i>Carryll Seelig</i>		
Date	October 22, 2003	Telephone	602-921-0217

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.



\*Total of 4 forms are submitted.

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<b>Art Unit</b>	
<b>Examiner Name</b>	
<b>Attorney Docket Number</b>	A01490

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The address associated with Customer Number:

OR

Firm or  
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

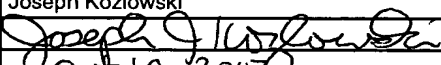
I am the:



Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## **SIGNATURE of Applicant or Assignee of Record**

<b>Name</b>	Joseph Kozlowski		
<b>Signature</b>			
<b>Date</b>	Oct 10, 2003	<b>Telephone</b>	

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